

U.S. Department of Justice  
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"  
on the reverse of this form.

PLAINTIFF

*James St. Louis*

COURT CASE NUMBER

*Civil #06-236 SLR*

DEFENDANT

*St Cheryl Morris, Rue Chris Kleen and  
Delaware Prisoners (all officers & supervisors including etc)*

TYPE OF PROCESS

*1983 Civil Sub***SERVE**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

*State of Delaware c/o Attorney General*

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

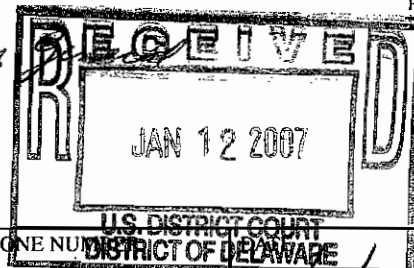
*820 N French St. Wilmington Delaware 19801***AT**

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

*James St. Louis  
SBI 446518  
DCC  
1181 Paddock Road  
Smymna Delaware 19977*Number of process to be  
served with this Form - 285*1*Number of parties to be  
served in this case*1*Check for service  
on U.S.A.*✓*SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All  
Telephone Numbers, and Estimated Times Available For Service):

Fold

Fold

*Second notice mailed to attorney  
per District Court 1/5/2007*

Signature of Attorney or other Originator requesting service on behalf of:

*James St. Louis*☒ PLAINTIFF  
☐ DEFENDANT

TELEPHONE NUMBER

*N/A*U.S. DISTRICT COURT  
DISTRICT OF DELAWARE*1/4/2007***SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**I acknowledge receipt for the total  
number of process indicated.  
(Sign only first USM 285 if more  
than one USM 285 is submitted)

Total Process

District  
of Origin

No. \_\_\_\_\_

District  
to Serve

No. \_\_\_\_\_

Signature of Authorized USMS Deputy or Clerk

*DF*

Date

*1-22-07*I hereby certify and return that ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described  
on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

*Keith Brady - Asst. State Solicitor*☐ A person of suitable age and dis-  
cretion then residing in the defendant's  
usual place of abode.

Address (complete only if different than shown above)

Date of Service

Time

*1/25/07**11:40 am*

Signature of U.S. Marshal or Deputy

*[Signature]*

Service Fee

Total Mileage Charges  
(including endeavors)**FILED**

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal or

Amount of Refund

REMARKS:

**JAN 26 2007**U.S. DISTRICT COURT  
DISTRICT OF DELAWARE